FORM PIC	J-1083	•			PR		Ca	ase Doo	cket No.	9186.4804	
in re Appli	cation of: PATF	RICK CAR	LL et al	/0.		ही					
Serial No:	08/8	72,088		JUN	0 7 199	19 G					
Filed:	06/1			E							
For:	: DIAGNOSTIC SANITARY TEST STREET TRADENARY										
THE COMMISSIONER OF PATENTS AND TRADEMARKS Washington, D.C. 20231											
Sir: AMENDMENT TRANSMITTAL LETTER											
Transmitted herewith is an amendment in the above-identified application.											
Small entity status of this application under 37 CFR 1.9 and 1.27 has been established by a verified statement previously submitted.											
A verified statement to establish small entity status under 37 CFR 1.9 and 1.27 is enclosed.											
No additional fee is required.											
The fee has been calculated as shown below: OTHER THAN A											
•	(Col. 1)		(Col. 2)	(Col. 3)		SMALL ENTITY		_	SMAL	L ENTITY	
-	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDIT. FEE	OR	RATE	ADDIT. FEE	
TOTAL	* 23	MINUS	** 41	= 0		x\$11	\$		x\$22	\$	
INDEP	* 3	MINUS	*** 3	= 0		x\$41	\$		x\$82	\$	
FIRST PRESENTATION OF MULTIPLE DEP. CLAIM						x\$135	\$		X\$270	\$	
					ΑD	TOTAL DIT. FEE	\$ 0.00	OR	TOTAL	\$	
If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.											
Please charge our Deposit Account No. 13-1130 in the amount of \$. A duplicate copy of this sheet is attached.											
X	A check in the amount of \$55.00 is attached.										
Х	The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 13-1130. A duplicate copy of this sheet is attached.										
	Any filing fees under 37 CFR 1.16 for the presentation of extra claims.										
	Any patent application processing fees under 37 CFR 1.17.										

If there are any additional charges, including extensions of time please bill our Deposit Account No. 13-1130.

MALIN, HALEY, DiMAGGIO & CROSBY, P.A. One East Broward Blvd., Suite 1609 Ft. Lauderdale, FL 33301 (954) 763-3303

I:\9186\FORMS\4804.248

Respectfully submitted/

Dale Paul DiMaggio, Reg. No.